



Our communities are changing and becoming increasingly diverse. The American Association of Colleges of Nursing (AACN) (2008, p. 37) defined diversity as “The range of human variation, including age, race, gender, disability, ethnicity, nationality, religious and spiritual beliefs, sexual orientation, political beliefs, economic status, native language, and geographical background. The AACN position statement on diversity, inclusion, & equity in academic nursing (Huerta, et al, 2017), stated that diversity references a broad range of individual, population, and social characteristics, including but not limited to age; sex; race; ethnicity; sexual orientation; gender identity; family structures; geographic locations; national origin; immigrants and refugees; language; physical, functional, and learning abilities; religious beliefs; and socioeconomic status. The International Council of Nurses (2018) further puts the onus on the health care provider, rather the patient, to ensure that racism and discrimination do not occur and that services are tailored to and culturally acceptable (p.15).

How should the Faith Community Nurse (FCN) respond to the statements above and the ever-changing landscape? To answer that, this position statement presents perspectives from

1. **Nursing Legal/Guiding Documents, and Organizations**
2. **Faith Community Nursing/Nursing Research**
3. **Feedback from Practicing FCNs**

The aim here is to provide substantial evidence to guide FCNs in responding to **Inclusion, Diversity, and Cultural Sensitivity**.

### **1. What does legal/guiding documents in Nursing say about Inclusion, Diversity, and Cultural Sensitivity?**

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Nursing practices **under the legal authority** of each state’s Nurse Practice Act and Board of Nursing policies. Nurse Practice Acts are statutory laws enacted by state legislators, and the State Boards of Nursing and exist to safeguard the public. Nursing and Nursing Specialties are **guided** by documents such as the American Nurses Association (ANA) Code of Ethics for Nurses (2015), Nursing’s Social Policy Statement, (2010), Nursing and Faith Community Nursing Specialties Scope and Standards Documents and Practice Statements. This Practice Statement is a response to the changes occurring in the Faith Community Nursing practice (environment, population, needs, ...etc).

The response to **Inclusion, Diversity, and Cultural Sensitivity** by the **practice of Faith Community Nursing** is **guided** by the *American Nurses Association (ANA) Code of Ethics for Nurses with Interpretive Statements* (2015), *Nursing’s Social Policy Statement*, (2010), *Nursing: Scope and Standards of Practice* (2021), *Faith Community Nursing: Scope and Standards of Practice*, (2017). In addition, each work setting (faith community, healthcare institution, or community setting) may also have policies that guide the FCN.

- ANA Code of Ethics for Nurses with Interpretive Statements, (2015). Available at <https://www.nursingworld.org/practice-policy/nursing-excellence/ethics/code-of-ethics-for-nurses/>
- ANA Nursing’s Social Policy Statement, (2010). Available at <https://www.nursingworld.org/nurses-books/guide-to-nursings-social-policy-statement-understanding-the-profession-fr/>
- ANA Nursing: Scope and Standards of Practice 4<sup>th</sup> ed. (2021) Available at <https://www.nursingworld.org/nurses-books/nursing-scope-and-standards-of-practice-4th-edit/>
- Faith Community Nursing: Scope and Standards of Practice (American Nurses Association & Health Ministry Association, 2005, 2012, 2017). Available at <https://www.nursingworld.org/nurses-books/faith-community-nursing-scope-and-standards-of-practice-3rd-edition/>
- Westberg Institute Position Statements. Available at <https://www.westberginstitute.org/>

The ANA, as well as state nurse practice acts, government regulations, and organizational policies and procedures, regard **Inclusion, Diversity, and Cultural Sensitivity** as essential components within Nursing. The ANA (2015) has called for a culture of dignity, respect, and inclusion in the profession. The *ANA Code of Ethics* (2015) has helped professional nurses identify core values and provide ethical guidance for inclusive decision-making.

*Nursing's Social Policy Statement*, (2010, p. 42) reminds nurses of their dynamic obligations to respond to changing needs, demands, and capacities of society. The *Nursing: Scope and Standards* (2021, p.10) states that, "Nursing is responsive to the changing needs of society." "... the [patient's] needs are identified from a holistic perspective and are met within the context of a cultural sensitive interpersonal relationship". The *Faith Community Nursing: Scope and Standards of Practice* (2017, p.13), state that "Faith Community Nurses promote whole-person health with intentional inclusion of religious or spiritual well-being and supportive care". It goes on to state that the values in the *Code of Ethics* (2015, p.15) apply to nurses in all roles, including Faith Community Nursing and provides exemplars from the practice of Faith Community Nursing to illustrate the nine Provisions. The nine Provisions include:

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person.
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective efforts, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy.
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain the integrity of the profession, and integrate principles of social justice into nursing and health policy.

## 2. What does nursing research say about Inclusion, Diversity, and Cultural Sensitivity?

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Even though there was a gap in Faith Community Nursing literature exploring the terms inclusion, diversity and cultural competence, there were literature reviews and conceptual analysis in Nursing using these terms. These articles provide valuable insights into the role of nurses in promoting inclusion, diversity, and cultural sensitivity.

- **Cultural Competence: An Evolutionary Concept Analysis** by Dudas, (2012). This article examined the concept of cultural competence in nursing and nursing education literature to clarify cultural competence nursing interventions.
- **Cultural Competence in Nursing: A Concept Analysis** by Sharifi, et al., (2019). This article explored the concept of cultural competence in nursing and discussed the role of nurses in providing culturally sensitive care.
- **Educational interventions designed to develop nurses' cultural competence: A systematic review** by Oikarainen, et al, (2019). This systematic review identified current best evidence on the types of educational interventions that have been developed to improve nurses' self-assessed cultural competence.
- **Current state of transcultural nursing theories, models, and approaches** by Sagar & Sagar, (2018). This literature review explored the concept of transcultural nursing and discussed the role of nurses in providing culturally sensitive care to diverse patient populations.

**Becoming inclusive: A code of conduct for inclusion and diversity** by Schmidt, MacWilliams, & Neal-Boylan, (2017), proposed a Code of Conduct for Nurses regarding patients: 1. Treat others impartially without regard to ethnicity, age, gender, disability, sexual orientation, nationality, language, economic status, geographic factors, religious/spiritual beliefs, and political beliefs. 2. Interact with others in ways that reflect the uniqueness and worth of others. 3. Actively listen without interrupting imposing own opinions 4. Elicit and acknowledge feedback from others. 5. Communicate in an open, compassionate, and positive manner. 6. Acknowledge and respect different beliefs, values, and practices. 7. Provide honest, accurate, and understandable information to others. 8. Involve others as partners in decision-making and support the rights of others to make choices for themselves 9. Advocate for others when they are unable to advocate for themselves or in instances of prejudice or discrimination. 10. Attend to the needs of others in a compassionate and safe manner 11. Follow-up on commitments made to others 12. Correct one's own actions or make change in behavior when needed 13. Engage in reflection and self-critique:

consider consequences to others before acting 14. Collaborate with patients/families to resolve complaints or conflicts in an honest and respectful manner. 15. Avoid aggressive behavior toward patients/ families, including mental, physical, and verbal abuse. 16. Keep personal information confidential unless permitted to share 17. Protect privacy during patient care.

### **3. What do FCNs say about Inclusion, Diversity, and Cultural Sensitivity?**

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A 10-question survey using *Survey Monkey* was facilitated by the Westberg Institute Research Committee and was made available to FCNs through multiple ways, including the Westberg Institute Community platform. The survey was left open for 11 weeks ( $N=62$ ). The questions/results are below.

1. As a Faith Community Nurse, how would you define inclusion?
  - 79.03% selected - Ensuring equal opportunities and access to health for all individuals, regardless of their background or characteristics.
  - 11.29% selected - Promoting diversity and tolerance within a faith community.
2. As a Faith Community Nurse, which of the following best describes cultural competence?
  - 98.39% selected - Having knowledge and understanding of different cultures and being able to effectively interact with people from diverse backgrounds.
3. In your opinion, why is cultural competence important today?
  - 91.94% selected - It helps to foster understanding and respect among individuals from different cultural backgrounds.
4. How can a Faith Community Nurse promote inclusion and cultural sensitivity in a faith community?
  - 49.18% selected - Encourage open and respectful communication among individuals.
  - 21.31% selected - Attend and advocate for diversity and inclusion training programs.
5. Cultural Competence: Faith Community Nurses, as healthcare providers, should strive to develop cultural competence by understanding and respecting the values, beliefs, and practices of different cultures. This includes being aware of one's own biases and actively seeking knowledge about diverse cultures.
  - 69.35% Strongly Agree
  - 27.42% Agree
6. Language Access: The Faith Community Nurse should advocate for individuals to have language access services, such as professional interpreters or translated materials when visiting health care providers, because it is essential to ensure effective communication and understanding.
  - 74.19% Strongly Agree
  - 22.58% Agree
7. Health Literacy: The Faith Community Nurse should communicate in a clear and understandable manner, using plain language and avoiding medical jargon. This helps individuals of different backgrounds comprehend health information and actively participate in their care.
  - 83.87% Strongly Agree
  - 16.13% Agree
8. Inclusive Facilities: The Faith Community Nurse should advocate that the faith community be physically accessible to individuals with disabilities, ensuring ramps, elevators, and other necessary accommodations are in place.
  - 73.77% Strongly Agree
  - 22.95% Agree
9. Culturally Sensitive Care Plans: The Faith Community Nurse should develop care plans that consider a patient's cultural context, including their family dynamics, social support systems, and cultural practices. This ensures care is tailored to individual needs and respects cultural preferences.
  - 70.97% Strongly Agree
  - 25.81% Agree
10. Addressing Health Disparities: The Faith Community Nurse should actively work towards eliminating health disparities by identifying and addressing systemic barriers that disproportionately affect marginalized communities and individuals. This may involve collaborating with community organizations and advocating for policy changes.
  - 67.74% Strongly Agree
  - 27.42% Agree

### Based on above survey results:

As a health care provider, the FCN strives to be culturally competent by understanding and respecting values, beliefs, and practices of individuals from different cultures. The FCN is aware of one's own biases and seeks knowledge about diverse cultures. The FCN advocates for individuals for equal access to health, language access services, and physical accessibility. The FCN promotes open and respectful communication among individuals to foster understanding and respect. The FCN communicates in a clear and understandable manner, using plain language and avoids medical jargon. Patient centered care plans developed by a FCN, considers cultural context, family dynamics, social support systems, and cultural practices.

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